



# PROOF OF DC RESIDENCY FORM

## *Applicant's Information*

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FIRST NAME

MIDDLE NAME

LAST NAME

Residence Address:

Telephone Number:

Email address:

## *Certifier's Information*

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FIRST NAME

MIDDLE NAME

LAST NAME

Relationship:

Telephone Number:

Email address:

DC Driver's License Number:

Expiration Date:

**OR**

DC Identification Card Number:

Expiration Date:

Certifier must sign this form and provide a valid DC Driver's license or valid DC Identification card reflecting the applicant's name and address listed above **AND** one (1) of the following proof of residency reflecting certifier's name and address:

*Utility Bill (Water, Gas, Electric or Oil bill) (customers must submit the entire bill and can not be over 60 days old)*  
*Telephone bill (no wireless or pager bills accepted)*  
*Cable Bill*  
*Original lease or rental agreement issued within the last 12 months with the name of the certifier as a lessee or renter*

*DC property tax bill*  
*Deed or Settlement Statement*  
*DC Homestead exemption certificate*  
*Valid Homeowners Insurance Policy reflecting names and address*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Certifier's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

DC DMV Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_